CAMPAIGN TREASURER'S REPORT SUMMARY									
(1)	Gabriel Aaron Ruiz	OFFICE USE ONLY							
	Name	ONLINE SUBMISSION							
(2)	35324 Ponderosa Dr	Submitted on:							
	Address (number and street) Fruitland Park, FL 34731	11/4/2020 14:03:19 (eastern)							
	City, State, Zip Code								
	Check here if address has changed	(3) ID Number: 362							
(4)	Check appropriate box(es):								
	 ☑ Candidate Office Sought: County Commission District 5 ☐ Political Committee (PC) ☐ Electioneering Communications Org. (ECO) ☐ Check here if PC or ECO has disbanded ☐ Party Executive Committee (PTY) ☐ Check here if PTY has disbanded ☐ Independent Expenditure (IE) (also covers an individual making electioneering communications) 								
	(5) Report	Identifiers							
Cove	er Period: From 10 / 30 / 2020 To	2 / 1 / 2021 Report Type: <u>TR-G</u>							
X O	riginal Amendment Spe	ecial Election Report							
(6)	Contributions This Report	(7) Expenditures This Report							
Casl	n & Checks \$, , o00	Monetary							
Loar		Transfers to Office Account \$, , , 0 . 00							
Tota	I Monetary \$, , , 000	Total Manatany C							
In-Ki	sind \$,,,000	Total Monetary \$, , 0 . 00							
		(8) Other Distributions \$, , <u>0</u> 00_							
(9)	(9) TOTAL Monetary Contributions To Date \$\\ \begin{array}{cccccccccccccccccccccccccccccccccccc								
(T	(11) Certification It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.) I certify that I have examined this report and it is true, correct, and complete: (Type name) Individual (only for IE Deputy Treasurer or electioneering comm.) (Type name) Candidate Chairperson (only for PC and PTY)								
X		<u>X</u>							
Si	gnature	Signature							

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name	Gabriel Aaron Ruiz				2) I.D. Numbe	er	362
(3) Cover Per	10/30/2020 iod///	thro	2 ough	/1/2021 / /	(4) Pag	je ¹	of ⁰
(5) Date	(7) Full Name		(8)	(9)	(10)	(11)	(12)
(6) Sequence Number	(Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Со Туре	ontributor Occupation	Contribution Type	In-kind Description	Amendment	Amount
f I							
J I							
1 1							
j. I							
j j							
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J I							
1 1							

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ga	abriel	Aaron	Ruiz	110000000000000000000000000000000000000			 (2) I.D. Num	iber	3	362	and an artist of the second
	1	0/30/	2020		2/1/202	1					
(3) Cover Pe	riod	1	1	through	1	1	(4) Page	1	of	1	

(5)	(7)	(8)	(9)	(10)	(11)
(6) Sequence Number	Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	Purpose (add office sought if contribution to a candidate)	Expenditure Type	Amendment	Amount
11/4/2020	Ruiz, Gabriel Aaron ***Protected Voter***	candidate refund to himself. all funds were self funded.	DI		\$5,806.82
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DS-DE 14 (Rev.	4440.				